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## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted Submitted after Initial with Initial Filing (surcharge Filing 37 CFR 1.16 (e)) required

| Attorney Docket Number | PC10381A         |  |
|------------------------|------------------|--|
| First Named Inventor   | Hiep HUATAN      |  |
| COMPLE                 | TE IF KNOWN      |  |
| Application Number     | Not yet assigned |  |
| Filing Date            | Filed Herewith   |  |
| Group Art Unit         | Not yet assigned |  |
| Examiner Name          | Not yet assigned |  |

| As a below named inventor                                       | , I hereby dec                      | lare that              | :   |                         |   |                     |
|---|-------------------------------------|------------------------|---|-------------------------|---|---------------------|
| My residence, post office add                                   | ress, and citize                    | enship ar              | e as stated below next to my na   | me.                     |   |                     |
|   |                                     |                        | nly one name is listed below) or<br>is claimed and for which a patent   |                         |   | plural              |
| ORAL FORMULATIONS OF  | MEDICAMEN                           | ITS                    |   |                         |   |                     |
|   |                                     |                        | (Title of the Invention)  |                         |   |                     |
| the specification of which is attached hereto OR                |                                     |                        | ,,  |                         |   |                     |
| ☐ was filed on (MM/DD/)   | YYYY)                               |                        | as United   | d States Application N  | umber or PCT Inter  | national            |
| amended by any amendment  | specifically re                     | erstand t<br>ferred to | s amended on (MM/DD/YYYY)<br>he contents of the above-identifi<br>above.<br>n is material to patentability as de                                    |                         |   |                     |
| certificate, or 365(a) of any F<br>America, listed below and ha | PCT internation<br>ve also identifi | al applic              | C. 119(a)-(d) or 365(b) of any fo<br>ation which designated at least of<br>by checking the box, any foreign<br>adate before that of the application | one country other the   | an the United Sta<br>tent or inventor's                     | ates of             |
| Prior Foreign Application<br>Number(s)                          | Count                               | ry                     | Foreign Filing Date<br>(MM/DD/YYYY)   | Priority<br>Not Claimed | Certified Co<br>YES   | ppy Attached?<br>NO |
| 0007112.6   | GB                                  |                        | 03/23/2000  | П                       | ×   | П                   |
| 0010846.4   | GB                                  |                        | 05/03/2000  |                         | ×   |                     |
|   |                                     |                        |   |                         | n   |                     |
|   |                                     |                        |   |                         |   |                     |
|   | L                                   |                        |   |                         |   |                     |
| Additional foreign application                                  | n numbers are                       | listed or              | a supplemental priority data sh   | eet PTO/SB/02B at       | ached hereto  |                     |
| I hereby claim the benefit un                                   | der 35 U.S.C.                       | 119(e) of              | any United States provisional ap  | plication(s) listed b   | elow:   |                     |
| Application Number  | (s)                                 | - 1                    | iling Date (MM/DD/YYYY)   |                         |   |                     |
| 50/198,878<br>60/208,155  |                                     | 04/19/2<br>05/31/2     |   | numbers                 | provisional appli<br>are listed on a<br>ntal priority data: |                     |
|   |                                     |                        |   |                         | ittai priority data :<br>i2R sheet attache                  |                     |

LIPRESS MAIL NO. ELLASSE 4888US

## **DECLARATION** ---- Utility or Design Patent Application

| I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the   |
|--|
| Lighted States of America, listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior  |
| I United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose  |
| information which is material to patentability as defined in 37 USC 1.58, which became available between the filing date of the prior application  |
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| United States information who   | or PCT Inter-                                    | national applicat                                 | on in the m<br>y as defined | nanner provide<br>In 37 USC        | d by the fi               | rst paragrapi                         | h of 35 l                            | J.S.C. 11 | 2. I ack      | nowledge    | the duty to disclose<br>f the prior application                           |
|---------------------------------|--|---|-----------------------------|------------------------------------|---------------------------|---------------------------------------|--------------------------------------|-----------|---------------|-------------|---|
| U.S. Parent                     | Application  <br>Num                             | Number or PC<br>ber                               | T Parent                    | Parent Filing Date<br>(MM/DD/YYYY) |                           |                                       | Parent Patent Number (if applicable) |           |               |             | ber   |
|                                 |  |   |                             |                                    |                           |                                       |                                      |           |               |             |   |
|                                 |  |   |                             |                                    |                           |                                       |                                      |           |               |             |   |
|                                 |  |   |                             |                                    |                           |                                       |                                      |           |               |             |   |
| Additiona Additiona             | I U.S. or PCT I                                  | nternational appl                                 | ication numbe               | ers are listed or                  | a suppleme                | ental priority d                      | lata sheet                           | PTO/SB/0  | 2B attacl     | hed heret   | 0.  |
|                                 |  | appoint the follo                                 |                             |                                    | s) to prosecu             | ite this applic                       | ation and t                          | o transac | t all busin   | ness in the | e Patent<br>Place Customer  |
| and Trademark                   | Office connec                                    | ted therewith.                                    |                             | er Number                          |                           |                                       |                                      |           |               |             | lumber Bar Code   |
|                                 |  |   | or                          |                                    |                           |                                       |                                      |           |               |             | Label here  |
|                                 |  |   | Registe                     | red practitioner                   | r(s) name/re              | gistration num                        | nber listed                          | below     |               |             |   |
|                                 | Name   |   | F                           | Registration<br>Number             |                           |                                       | Name                                 |           |               | <b>→</b> F  | Registration<br>Number  |
| Peter C. Ric                    | chardson   |   |                             | 27,526                             |                           | A. Dean                               |                                      |           |               |             | 31,185  |
| Allen J. Spir                   |  |   | ļ                           | 25,749                             |                           | Mervin E                              |                                      |           |               |             | 32,723  |
| Paul H. Gin                     |  |   | l                           | 28,718                             |                           | Valerie N                             |                                      |           | - 1           |             | 33,688  |
| J. Trevor Lu                    |  |   | ŀ                           | 28,567                             |                           | Bryan C.                              |                                      |           | - 1           |             | 34,462<br>36,257  |
| James T. Jo<br>Grega C. B       |  |   | i                           | 30,561<br>30,977                   |                           | Robert T<br>B. Timoti                 |                                      |           | - 1           |             | 39,156  |
| Robert F. S                     |  |   |                             | 31,304                             |                           | Alan L. K                             |                                      | Jan       | - 1           |             | 37,371  |
| Grover F. F                     |  |   |                             | 31,760                             |                           | Jolene W                              |                                      | man       |               |             | 35,428  |
| Karen DeB                       |  |   |                             | 32.977                             |                           | Kristina l                            |                                      |           | - 1           |             | 37,864  |
| Lorraine B.                     | Ling   |   | l                           | 35,251                             |                           | Seth H. J                             | Jacobs                               |           | ı             |             | 32,140  |
| Garth Butte                     | rfield   |   |                             | 36,997                             |                           | Martha A                              |                                      |           | - 1           |             | 31,820  |
| Carl J. God                     |  |   | i                           | 39,203                             |                           | Gregory                               |                                      |           | - 1           |             | 36,647  |
| Raymond N                       |  |   |                             | 26,810                             |                           | E. Victor Donahue                     |                                      |           |               |             | 35,492  |
| Jennifer A.                     |  |   | i                           | 40,049                             |                           | Roy F. W                              |                                      |           | - 1           |             | 42,208<br>37,807  |
| Israel Nisse<br>Adrian G. L     |  |   |                             | 27,582                             |                           | Todd M. Crissey                       |                                      |           |               |             | 44,222  |
| A. David Jo                     |  |   | 1                           | 41,406<br>37,858                   |                           | Deborah A. Martin<br>Jeffrey N. Myers |                                      |           |               |             | 41,213  |
| Lawrence C                      |  |   |                             | 28.587                             |                           | Elsa Diu                              |                                      |           | 1             |             | 45,963  |
| Gabriel L. F                    |  |   | 1                           | 40,681                             |                           | Michelle A. Sherwood                  |                                      |           |               | 36,271      |   |
| Donna R. G                      |  |   |                             |                                    |                           |                                       | Arlene K. Musser                     |           |               | 37,895      |   |
| Addition                        | nal registered p                                 | oractitioner(s) na                                | med on supple               | emental Regist                     | ered Practiti             | oner Informat                         | ion sheet F                          | PTO/SB/0  | 2C attach     | ned heret   | 0.  |
| Direct all cor                  | respondence                                      |   | ustomer Nur                 |                                    |                           |                                       |                                      | OR        | ⊠ Coi         | rrespond    | ience address below   |
|                                 |  | 01  | Bar Code L                  | .abel                              |                           |                                       |                                      |           |               |             |   |
| Name                            | Paul H. Gir                                      | sburg   |                             |                                    |                           |                                       |                                      |           |               |             |   |
| Address                         | Pfizer Inc                                       |   |                             |                                    |                           |                                       |                                      |           |               |             |   |
| Address                         | 235 East 4                                       | 2nd Street, 20th                                  | Floor                       |                                    |                           |                                       |                                      |           |               |             |   |
| City                            | New York   |   |                             | State                              | Ne                        | w York                                |                                      | Zip Co    | ode           | 10017-5     | 755   |
| Country                         | United Stat                                      | es Of America                                     | Te                          | elephone                           | (2                        | 12)573-2369 Fax                       |                                      |           | (212)573-1939 |             | 3-1939  |
| punishable by<br>application or | oe true, and<br>y fine or imp<br>any patent issu | further that the<br>prisonment, or<br>sed thereon | ese statemer<br>both, under | nts were mad<br>18 U.S.C. 1        | le with the<br>001 and ti | knowledge<br>nat such wil             | that willf<br>liful false            | ul false  | statemen      | nts and     | rmation and belief are<br>the like so made are<br>ize the validity of the |
|                                 | le or First In                                   |   |                             | as been filed                      | for this un               | signed inver                          |                                      |           |               |             |   |
|                                 | Given Name                                       | (first and midd                                   | le [if any])                |                                    |                           |                                       | Fami                                 | ly Name   | or Surn       | ame         |   |
| Hiep                            |  |   |                             |                                    | HUATAN                    |                                       |                                      |           |               |             |   |
| Inventor's<br>Signature         |  | mes   | Huaran                      |                                    |                           |                                       |                                      |           | Date          |             | 16700007  |
| Residence:                      | City   | County of h                                       | Cent                        | State                              |                           | Country                               | ENGL                                 | AND       | Citize        | nship       | GB  |
| Post Office                     |  |   |                             | ch and Dev                         | elonment                  |                                       |                                      |           |               |             | L.:   |
| Post Office                     |  |   |                             |                                    | Ciopinolit                |                                       |                                      |           |               |             |   |
| i osi omce                      | Addiess  | Ramsgate  | rwau, san                   | awicii                             |                           |                                       |                                      |           |               |             |   |

CT13 9NJ Country ENGLAND

Zip Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

County of Kent State

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PTO/SB/02A( 3/97)
Approved for use through 09/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION ADDITIONAL INVENTOR(S)
Supplemental Sheet

| Name of Additional Joint   | Inventor if any                                   | ПП      | A netit  | ion hae h   | een file   | ed for the            | Lunsin  | ned invent       | nr                                     |                        |
|--|---|---------|----------|---|------------|-----------------------|---------|------------------|--|------------------------|
|  |   |         | v hear   | etition has been filed for this unsigned inventor  Family Name or Surname |            |                       |         |                  |  |                        |
| Alison Jane Soards   | rst and middle [if a                              | nyjj    |          | NOCK  |            |                       |         |                  |  |                        |
| Inventor's   |   |         |          |   |            |                       |         |                  | Date                                   | 19 Serias and 1        |
| Signature  | A.ISI   | sil-    |          |   |            |                       |         |                  |  | 19 <del>february</del> |
| Residence: City  | County of Kent State                              |         |          |   | Co         | Country ENGLAND       |         |                  | Citizenship                            | GB                     |
| Post Office Address  | Pfizer Central Re                                 | lopment |          |   |            |                       |         |                  |  |                        |
| Post Office Address  | Ramsgate Road,                                    | Sandwi  | ch       |   |            |                       |         |                  |  |                        |
| City   | County of Kent                                    | Sta     | te       |   | Zip        | CT13                  | 9NJ     | Country          | ENGLAND                                |                        |
| Name of Additional Joint   | Inventor, if any:                                 |         | A peti   | tion has t  | een fil    | ed for thi            | s unsi  | gned invent      | or                                     |                        |
| Given Name (f  | irst and middle [if a                             | ny])    |          |   |            |                       | Fa      | mily Name        | or Surname                             |                        |
| Dimitris   |   |         |          | PAPAD   | OPOL       | JLOS                  |         |                  |  |                        |
| Inventor's<br>Signature  | D. PAPA   | Pai     | tsoj     | 7   | Ø          | 37,                   |         |                  | Date                                   | 16 February<br>2001    |
| Residence: City  | County of Kent                                    |         | State    | Country ENGLAND   |            |                       |         |                  | Citizenship                            | GB                     |
| Post Office Address  | Pfizer Central Re                                 | search  | and Deve | lopment   |            |                       |         |                  |  |                        |
| Post Office Address  | Ramsgate Road,                                    | Sandwi  | ich      |   |            |                       |         |                  |  |                        |
| City   | County of Kent State Zip CT13 9NJ Country ENGLAND |         |          |   |            |                       |         |                  |  |                        |
| Only .   |   |         |          |   |            |                       |         |                  |  |                        |
| Name of Additional Joint   |   |         |          | tion has t  |            | led for th            | is unsi | I<br>igned inven | tor                                    |                        |
| Name of Additional Joint   |   |         |          | tion has t  |            | led for th            |         |                  | tor<br>or Surname                      |                        |
| Name of Additional Joint   | Inventor, if any:                                 |         |          | tion has t  |            | led for th            |         |                  |  |                        |
| Name of Additional Joint<br>Given Name (f  | Inventor, if any:                                 |         |          | tion has t  |            | led for th            |         |                  |  |                        |
| Name of Additional Joint<br>Given Name (f  | Inventor, if any:                                 |         |          | tion has t  | peen fil   | led for th            |         |                  | or Surname                             |                        |
| Name of Additional Joint<br>Given Name (f<br>Inventor's<br>Signature   | Inventor, if any:                                 |         | A peti   | tion has b  | peen fil   |                       |         |                  | or Surname<br>Date                     |                        |
| Name of Additional Joint Given Name (f Inventor's Signature Residence: City  | Inventor, if any:                                 |         | A peti   | tion has t  | peen fil   |                       |         |                  | or Surname<br>Date                     |                        |
| Name of Additional Joint Given Name (f Inventor's Signature Residence: City Post Office Address Post Office Address  | t Inventor, if any:                               |         | A peti   | tion has t  | peen fil   |                       | Fa      |                  | or Surname<br>Date                     |                        |
| Name of Additional Joint Given Name (f  inventor's Signature Residence: City Post Office Address Post Office Address City  | t Inventor, if any:                               | any])   | A peti   | Zip   | c C        | ountry                | Fa      | ountry           | Date Citizenship                       |                        |
| Siven Name of Additional Joint Given Name (f Inventor's Signature Residence: City Post Office Address Post Office Address City Name of Additional Joint  | Inventor, if any: first and middle [if a          | any])   | A peti   | Zip   | c C        | ountry                | Fa C    | ountry           | Date Citizenship                       |                        |
| Siven Name of Additional Joint Given Name (f Inventor's Signature Residence: City Post Office Address Post Office Address City Name of Additional Joint  | t Inventor, if any:                               | any])   | A peti   | Zip   | c C        | ountry                | Fa C    | ountry           | Date Citizenship                       |                        |
| Name of Additional Joint Given Name (f  Given Name (f  Inventor's Signature Residence: City Post Office Address Post Office Address City  Name of Additional Joint Given Name (f                       | Inventor, if any: first and middle [if a          | any])   | A peti   | Zip   | c C        | ountry                | Fa C    | ountry           | Date Citizenship                       |                        |
| Name of Additional Joint Given Name (f Given Name (f Inventor's Signature Residence: City Post Office Address Post Office Address City Name of Additional Joint Given Name (f Inventor's Signature     | Inventor, if any: first and middle [if a          | any])   | A peti   | Zip   | Cobeen fil | ountry<br>lied for th | Fa C    | ountry           | Date Citizenship  tor or Surname  Date |                        |
| Name of Additional Joint Given Name (f Given Name) Inventor's Signature Residence: City Post Office Address Post Office Address City Name of Additional Joint Given Name (f Inventor's Residence: City | Inventor, if any: first and middle [if a          | any])   | A peti   | Zip   | Cobeen fil | ountry                | Fa C    | ountry           | Date Citizenship  tor or Surname       |                        |
| Name of Additional Joint Given Name (f Inventor's Signature Residence: City Post Office Address City Name of Additional Joint Given Name (f Inventor's Signature Residence: City Post Office Address   | Inventor, if any: first and middle [if a          | any])   | A peti   | Zip   | Cobeen fil | ountry<br>lied for th | Fa C    | ountry           | Date Citizenship  tor or Surname  Date |                        |
| Name of Additional Joint Given Name (f Given Name) Inventor's Signature Residence: City Post Office Address Post Office Address City Name of Additional Joint Given Name (f Inventor's Residence: City | Inventor, if any: first and middle [if a          | any])   | A peti   | Zip   | Cobeen fil | ountry<br>lied for th | Fa C    | ountry           | Date Citizenship  tor or Surname  Date |                        |